FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB Number: | 3235-0287 | | | | | |
| Estimated average b | urden | | | | | |
| hours per response: | 0.5 | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>BEATTIE E SCOTT</u> | | | | 2. Issuer Name and Ticker or Trading Symbol REVLON INC /DE/ [REV] | | | | | | | (Ch | elationship eck all appli X Directo | cable) | g Pers | son(s) to Iss 10% Ov | | | | |
|--|--|---------------|----------------------|---|---|-----|--|------------|-----------------|---|------------------|---|---|--|---|--|--|---------|-------------|
| | /LON, INC | C., ONE NEW Y | (Middle) ORK PLAZ | ZA | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2021 | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | |
| NEW YORK, NY 10004 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | | | | | | | |
| (Street) NEW YO | ORK N | Y | 10004 | | | | | | | | | | | iled by Mor | | orting Perso n One Repo | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | Date | Execution Date, | | , | Code (Instr. 5) | | | (A) or 3, 4 and | Benefici | es Form ally (D) of Following (I) (II | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) P | | Price | Transac | nsaction(s) tr. 3 and 4) | | | (IIISti. 4) |
| Class A Common Stock 05/01 | | | 05/01/ | 2021 | | | | M | | 1,70 | 4 | A | (1) | (1) 51,952 | | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution Date, Transcription or Exercise (Month/Day/Year) if any Co | | ransacti ode (Ins | ction of | | Exp | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | c | ode V | (A |) (D) | Dat Exe | te ercisable | | xpiration ate | Title | OI N Of | r umber | | | | | |
| Restricted Stock Units | (1) | 05/01/2021 | | | М | | 1,704 | | (2) | | (2) | Commo | n 1 | 1,704 | \$0 | 18,738 | 3 | D | |

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of Revlon, Inc. Class A Common Stock, par value \$0.01 per share, following the dates that the RSUs become vested.
- 2. Represents the vesting of one-twelfth of previously-reported time-based RSUs (rounded up to the nearest whole share pursuant to the award terms).

/s/ Grace Fu for E. Scott Beattie pursuant to a Power of Attorney granted on January 4

05/04/2021

2021

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.